

REQUEST FOR RECERTIFICATION
(Proof of Credit - 940C)

Mailing Address: Louisiana Department of Labor
Office of Management & Finance
UI Tax Accounting/Adjustments Unit
P.O. Box 94186
Baton Rouge, LA 70804-9186
Phone:(225) 342-2961 Fax: (225) 342-5833

**This form is semi-interactive. You can complete
the request online but must mail or fax it.**

State ID # _____ Federal ID# _____

Year Requested _____

Name of Business _____

Account is active () Account is inactive()

Requested By _____ Title _____

Signature _____

Phone Number _____

Fax Number _____

Date _____

Comments _____

This section for agency use only.

State ID # _____

Year Requested _____

Rate _____

Taxable Wages _____

Contributions Paid After January 31st _____

Contributions Paid Before February 1st _____

Processed By _____

Date Entered _____